


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # 758860
 1. Entity Name
NATIONAL ALLIANCE FOR YOUTH SPORTS, INC.



Principal Place of Business Mailing Address
2050 VISTA PARKWAY **2050 VISTA PARKWAY**
WEST PALM BEACH, FL 33411 US **WEST PALM BEACH, FL 33411 US**

DO NOT WRITE IN THIS SPACE



01062004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-2134374 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ENGH, FREDERIC C
2050 VISTA PARKWAY
WEST PALM BCH, FL 33411

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

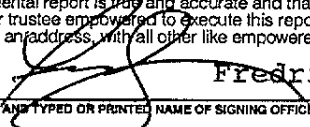
10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ENGH, FREDRIC C
STREET ADDRESS	200 MIRAMAR WAY
CITY-ST-ZIP	WEST PALM BEACH, FL 33405
TITLE	DVPC
NAME	BIERSCHIED, ROBERT C.
STREET ADDRESS	1179 SKILLMAN AVE., W
CITY-ST-ZIP	ROSEVILLE, MN
TITLE	D
NAME	SCHARBERT, ROBERT
STREET ADDRESS	6500 SUTTON COURT
CITY-ST-ZIP	PARKLAND, FL 33067
TITLE	D
NAME	BAGGETT, WILLIAM
STREET ADDRESS	12791 PACKWOOD ROAD
CITY-ST-ZIP	JUNO ISLAND, FL
TITLE	2VPD
NAME	GRAY, MICHAEL
STREET ADDRESS	1203 FARMCREST DRIVE
CITY-ST-ZIP	UNION, KY 41091
TITLE	3VPD
NAME	JOHNSTON, MARTY
STREET ADDRESS	3033 WHITENARAH WAY
CITY-ST-ZIP	SAVANNAH, GA 31410

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 01/20/04-80095-006 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Fredric C. Engh** **1/16/04** **561-684-1141**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #